POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			11
O.I.P.E. CLASSIFIER		12	10/15
FORMALITY REVIEW	72	1141	Wingle
RESPONSE FORMALITY REVIEW	CK	11001	3-20-02.

INDEX OF CLAIMS

V	Rejected	NNon-electe	ed
=	Allowed	I Interference	ce
_	(Through numeral) Canceled	A Appeal	
<u>.</u>	Restricted	O Objected	

*	Hestricted U	Objected	
Claim Date	Claim Date	Claim	Date
Final Corginal X II/1263	Final Fina	Final	
	51 1/	101	
	52 1 1	102	
P	\$	103	
	54	104	
5	45	105	
5	56	106	_
		107	
В	5B 5B 60 4 60 4 60 60 60 60 60 60 60 60 60 60 60 60 60	109	┈┤┈┧┈ ┼┈┼┈┼
10		110	
 		111	
12	@ ÷ N	112	
13	63	113	
14	64	114	
15 11	65	115	
17 18	66	116	┝┼┼┼┼┼┼┼┼
17 11 1	67	117	
1B	68	118	
19	(6) V	120	
	70 4	121	
	71 72 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	122	▎▐▗▋ ▀▋▀▐▍▐ ▕▕ ▔▜▀
	73	123	
20 1 22 23 24 25 26 27 28 29 20 20 20 20 20 20 20	74	124	
25	75 V	125	
146	@ N	126	
27		127	
28	78	128	
29	79	129	
(a)	80	130	
	81 7 7	131	
33	83	133	
	84	134	
85	85	135	
36	86	136	
B7	87	137	
38	88	138	
39	89	139	
40	90	140	
41	91	141	+
42 43 44	92	142	
	93 94	144	▗▕▗▕▗▕▗▕
45 45	95	145	▎▐▗ ▐ ▕ ▐ ▕
46	96	146	
41	97	147	
	98	148	
449	99	149	
50 12	100	150	
2			

BEST AVAILABLE COPY

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)